ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):		FOR COURT USE ONLY
TELEPHONE NO.: FAX NO.:		
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN I COUNTY COURTHOUSE, 220 W. BROADWAY, SAN DIEGO, CA 9210 FAMILY COURT BUILDING, 1555 6TH AVE., SAN DIEGO, CA 9210 MADGE BRADLEY BUILDING, 1409 4TH AVE., SAN DIEGO, CA 9210 NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 9208 EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020-39 SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	<b>DIEGO</b> )1-3814	
FAMILY COURT BUILDING, 1555 6TH AVE., SAN DIEGO, CA 92101-3  MADGE BRADLEY BUILDING, 1409 4TH AVE., SAN DIEGO, CA 9210  NORTH COUNTY DIVISION 325 S MELPOSE DR. VISTA, CA 9209	3294 31-3105 1 6651	☐ Dissolution
☐ RAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020-39 ☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	41 -5649	Legal Separation Nullity
PLAINTIFF(S)/PETITIONER(S)		☐ Paternity
DEFENDANT(S)/RESPONDENT(S)		☐ Custody ☐ Reserved Issues
		Other
MEMORANDUM THAT FAMILY LAW CASE IS A	T ISSUE	CASE NUMBER
What date was the petition/complaint filed?		
2. What date was the response/answer filed?		
3. All parties have been served with process or have appeare	d.	
4. ☐ The case is entitled to preference pursuant to code secti	on	
EITHER ITEM 5 OR ITEM 6 BELOW N	MUST BE COMPLET	TED, NOT BOTH!
5. The trial will take 5 hours or less. Estimated time in hours	The undersigned	d agrees the case may be set on the short
cause calendar on any Friday (Monday in East County, Thurso	day or Friday in Nortl	h County) except:
(List Thursday/ <b>Friday/N</b>	Monday dates at leas	st four months into the future).
For all short cause trials, counsel are reminded of the med	et and confer requi	rement as set forth in the local rules.
6. The trial will take days.		
7. Indicate below, names of party being represented and trial	counsel:	
Petitioner	Respondent	
Attorney	Attorney	
Firm	Firm	
Address	Address	
Telephone	Telephone	
Any party not in agreement with any of the above shall, within	10 days of service th	nereof, file it's own memorandum with the
court.	•	
Dated:		
	Signature of Tria	I Counsel/Petitioner or Respondent

	CASE NUMBER:	
DECLAF	RATION OF SERVICE BY MAIL	
l,	declare that: I am over the	
e of 18 years and not a party to the case; I am	employed in, or am a resident of, $\ \square$ the County of San Diego, California	
	; where the mailing occurred; and my busines	
dress is:(NO., STREET)		
	N CASE IS AT ISSUE by placing true copies thereof in separate envelope	
dressed to each addressee, respectively, as fol	llows:	
I then sealed each envelope and, with the posta	age thereon fully prepaid, placed each for deposit in the United States Post	
rvice at		
I declare under penalty of perjury under the lav	ws of the State of California that the foregoing is true and correct.	
ited:		
	Signature	